EXHIBIT 2

UNITED STATES DISTRICT COURT FOR THE DISTRICT OF MASSACHUSETTS

Civil Action No. 04-10233-RCL

JONATHAN BEIJAR Plaintiff

٧.

STANLEY FASTENING SYSTEMS, L.P. Defendant

PLAINTIFF, JONATHAN BEIJAR'S ANSWERS TO DEFENDANT'S **INTERROGATORIES**

- 1. Please state your full name, present address, date of birth and social security number.
- Name: A.

Jonathan Beijar

Address:

61 Laura Keene Ave.

Acushnet, Massachusetts

Date of Birth:

12/8/1977

Social Security Number:

013-62-5082

- Please set forth in full detail the facts of the incident giving rise to this 2. lawsuit, including but not limited to:
 - a. where the incident occurred;
 - b. how the incident occurred; and
 - c. when the incident occurred.
- Lot 14-5 Pirates Cove Road, Osterville, Massachusetts Α. a.
 - A Stanley Bostitch pneumatic nailer fell from an overhead staging plank at my worksite as I was walking on the ground in the area below the staging. I attempted to avoid being struck by the nailer, but the barrel of the nailer struck my chest and spontaneously discharged, firing a three and a half inch roofing nail through my sternum, piercing my right ventricle, and lodging into my heart.
 - February 1, 2001, at approximately 12:20 P.M.
- Please identify by full name and address every person who has 3. information about the incident, including but not limited to eyewitnesses, and briefly state for each the nature of their information.

- all treatments, the nature of all treatments, and your understanding of the purpose of all treatments.
- A. I am not presently being treated for the injuries that I sustained as a result of the February 1, 2001 incident.
- 21. For the period of February 1, 1996 through to the present, set forth whether you have suffered from any disease, injury, illness, or other condition and, if so, provide the name or a description of the disease, injury, illness or other condition; the date when each such disease, injury, illness or other condition began and ended; the name and address of each physician or other health care provider from whom you received treatment for each such disease, injury, illness, or other condition together with the dates of treatment rendered; the name and address of each hospital or other institution to which you were admitted or from which you received treatment together with the dates of admission.
- A. To the best of my recollection, I did not suffer any significant injuries or illnesses during the stated time period.
- 22. Please identify each person whom you expect to call as an expert witness at trial, state the subject matter on which each expert is expected to testify, state the substance of the facts and opinions to which each expert will testify, and summarize the grounds for each opinion.
- A. Information regarding expert witnesses, if not privileged, will be furnished seasonably.
- 23. Please state the basis for the contention in Paragraph 24 of your Complaint that "due notice" of "any and all breaches or warranty" was provided to Stanley, including in your answer:
 - a. The nature of the "due notice:"
 - b. By and to whom the "due notice" was provided; and
 - c. The date(s) on which "due notice" was provided.
- A. On January 21, 2004, my attorney wrote to Stanley Fastening Systems,
 L.P.'s General Partner detailing the February 1, 2001 incident, describing the nailer, and identifying my resulting injuries.
- 24. Please identify each occasion on which you used the product, or any similar product, including in your answer the purpose for which you used it and the length of time you used it.
- A. I used pneumatic nailers on a few home remodeling projects. I do not recall the length of time that I used the nailers.

To the best of my recollection, I used a pneumatic nailer at the Care Free Homes, Inc. worksite at Lot 14-5 Pirates Cove Road, Osterville, Massachusetts on a couple of occasions. I do not recall the exact number of occasions on which I used a nailer at the Pirates Cove Road worksite, nor do I recall which nailer(s) I used or for how long I used the nailer(s). I did not use a nailer on February 1, 2001.

- 25. Were you using any safety equipment at the time the incident occurred? If so, please identify each type of safety equipment you were using and its/their present location.
- A. No.

Signed under the penalties of perjury this ________ day of October, 2004.

Jonathan Beijai

As to Objections:

JONATHAN BEIJAR By his attorney,

Scott W. Lang, Esquire BEO #285720

Lang, Xifaras & Bullard

115 Orchard Street

New Bedford, MA 02740

(508) 992-1270

Dated: October 18, 2004

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CERTIFICATE OF SERVICE

Scott W. Lang, Esquire